

United States Environmental Protection Agency
Washington, D.C. 20460
DATA CALL-IN RESPONSE

OMB Approval 2070-0174
EPA FORM 6300-4

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form.
Use additional sheet(s) if necessary.

1. Company Name and Address
SHARDA CROP CHEM LIMITED
P.O. Box 640
HOCKESSIN, DE 197070640

2. Case # and Name
0181 - Metribuzin
Chemical # and Name: 101101
Metribuzin

3. Date and Type of DCI and Number
28-Aug-2020
GENERIC
ID # GDCL-101101-1825

4. EPA Product
Registration

5. I wish to cancel
this product
registration
voluntarily

6. Generic Data

6a. I am claiming a Generic Data
Exemption because I obtain the
active ingredient from the source
EPA registration number listed
below.

6b. I agree to satisfy Generic Data
Requirements as indicated on the
attached form entitled
"Requirements Status and
Registrant's Response."

7. Product Specific Data

7a. My product is an MUP and I
agree to satisfy the MUP
requirement on the attached form
entitled "Requirements Status and
Registrant's Response."

7b. My product is an EUP and I
agree to satisfy the EUP
requirement on the attached form
entitled "Requirements Status and
Registrant's Response."

82633-24

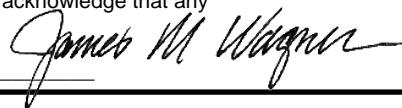
X

N/A

N/A

8. Certification: I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law.

Signature and Title of Company's Authorized Representative _____



9. Date

11/30/2020

10. Name of Company SHARDA CROP CHEM LIMITED

11. Phone Number 302 635 7290